

<b>Wisconsin Medicaid PDL Phase-In Implementation Schedule</b>	
<b>Therapeutic Class</b>	<b>Prior Authorization Required Date</b>
Leukotriene Modifiers	Prior Authorization Not Required
Hypoglycemics, Thiazolidinediones	Prior Authorization Not Required
Angiotensin II Receptor Blockers	November 1, 2004
Antimigraine Agents, Triptans	November 1, 2004
Bone Resorption Suppression and Related Agents	November 15, 2004
Glucocorticoids, Inhaled	November 15, 2004
Lipotropics, Statins*	November 15, 2004
Intranasal Rhinitis Agents	November 29, 2004
Lipotropics, Other	November 29, 2004
NSAIDs*	December 13, 2004

\* Please note: The following drugs previously required Prior Authorization (PA). Effective October 1, 2004 these drugs are non-preferred and require the use of the new Prior Authorization/Preferred Drug List (PA/PDL) Exemption Request: Caduet, Pravachol, Pravigard, Vytorin, Arthrotec, Bextra, Celebrex, Mobic.

PA Required Date — Date physicians/prescribers and providers are required to request and obtain PA for non-preferred drugs on the PDL in order for prescription to be dispensed. See note above for exceptions. This is also the first date drug claims will begin to deny if approved PA number is not submitted for non-preferred drugs listed on the PDL.

STAT-PA — Dispensing providers may obtain PA for non-preferred drugs listed on PDL starting October 13, 2004. For STAT-PA requests, the date of service may be up to 31 days in the future or up to four days in the past.